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CHRONIC DISEASES IN PEOPLE LIVING IN QUILOMBOLA TERRITORY

Registration: Not applicable.

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Background: Over the years, chronic degenerative diseases have gained greater emphasis in relation to infectious and parasitic diseases, associated with technological advances in the health area and also, consequent improvement in basic sanitation conditions. Studies indicate that there is an association between chronic diseases and higher health care costs. This increase in costs impacts both the patient and the health systems. In the most vulnerable populations, among them the quilombola population, it has been observed that chronic diseases cause impacts on health conditions.

Objectives: To verify the existence of chronic diseases diagnosed in people living in the quilombola territory.

Methods: A cross-sectional and quantitative field study was carried out in a quilombola territory. For data collection, a semi-structured questionnaire was applied to 85 randomly selected households, where one resident responded for all residents of the household. The eligibility criteria were: households registered with the ESF and age over 18 years.

Results: The sample consisted of 154 people, 42.2% in the age group between 39-59 years. 42.9% of the quilombola people were identified with a diagnosis given by the doctor of a chronic, physical or mental illness, or of long duration and that did not limit their usual activities.

Conclusion: The epidemiological transition, through access to and use of health services, may produce changes in the health profile of this population with a likely increase in diagnoses of chronic diseases and limitations on usual activities. However, we emphasize the hygienic and sanitary conditions, evidenced by the lack of basic services, such as sanitation, drinking water and the accumulation of household waste. Therefore, we suggest studies to also verify the prevalence of infectious and parasitic diseases in the quilombola territory.

Implications: In order to promote greater attention to health, given the conditions of vulnerability in which they are inserted, with the difficulty of accessing health services and the lifestyle, physiotherapy should be included in the quilombola territory.

Keywords: chronic disease, ethnicity

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POSTURAL CONTROL IN BRAZILIAN UNDERGRADUATE STUDENTS: AN OBSERVATIONAL STUDY

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Background: Postural control has two main functional goals: postural orientation and balance. It relies on the integration of motor, sensory, and cognitive systems to regulate body positioning under different conditions. It is influenced by age, physical activity level, and psychosocial aspects. University populations are considered healthy due to age and period of life. However, there have been growing concerns related to them, since mental health has suffered the impact from the academic and social demands.

Objectives: To describe the postural control of undergraduate university students.

Methods: This is a descriptive, cross-sectional study conducted with 96 undergraduate university students (73.26% female; mean age = 21.85 ± 2.24 years). Participants underwent static postural control assessments using a force platform (stabilometry) in two conditions: eyes open (EO) and eyes closed (EC), with a duration of 60 seconds for each condition. The parameters analyzed included elliptical sway area, standard deviation, mean frequency, and mean velocity in both the anteroposterior (AP) and mediolateral (ML) axis. Data were described by presenting mean and standard deviation. A paired t-test was also conducted to compare EO and EC conditions. EC/EO ratio for elliptical sway area was calculated using the following formula: $(EC - EO / EC + EO) * 100$.

Results: The mean elliptical sway area was $284.73 \pm 125.42 \text{ mm}^2$ under the EO, and $367.28 \pm 230.48 \text{ mm}^2$ in EC condition. The standard deviation of sway was $5.00 \pm 1.48 \text{ mm}$ in the AP axis and $4.77 \pm 1.24 \text{ mm}$ in the ML axis for the EO condition, and $5.59 \pm 2.08 \text{ mm}$ in the AP axis and $5.26 \pm 1.61 \text{ mm}$ in the ML axis for the EC one. The mean frequency of sway was $0.17 \pm 0.07 \text{ Hz}$ in the AP axis and $0.23 \pm 0.08 \text{ Hz}$ in the ML axis with EO, and $0.24 \pm 0.10 \text{ Hz}$ in the AP axis and $0.31 \pm 0.11 \text{ Hz}$ in the ML axis with EC. Mean velocity was $13.34 \pm 4.38 \text{ mm/s}$ in the AP axis and $10.37 \pm 1.97 \text{ mm/s}$ in the ML axis for the EO condition, and $15.09 \pm 4.29 \text{ mm/s}$ in the AP axis and $13.07 \pm 3.53 \text{ mm/s}$ in the ML axis for the EC condition. A significant difference was found when comparing EO and EC elliptical sway area, with $t(95) = -4.56$, $p < .001$. Finally, 67.71% of the participants were more reliant on vision (positive EC/EO ratio).

Conclusion: The findings provide a descriptive profile of postural control on undergraduate students. As expected, there was an effect from the visual condition, with EC showing higher values across all parameters. In addition, the values described herein differed when compared to previous studies that assessed healthy individuals of the same age, strengthening the relevance of investigating the mechanisms surrounding that process.

Implications: This study contributes to physiotherapy by providing insights into postural control in undergraduate students. Alterations in stabilometric variables, compared to a healthy group of the same